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APPLICATION NO.	FILING DATE		FIRST NAMED INVENTO	OR .	ATTORNEY DOCKET NO.		CONFIRMATION NO.
10/082,468	8 02/25/2002		Shawn Domenic Lovela	and	. 13768.254		4394
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Change of correspond Address form PTO/SB/12 "Fee Address" indicat PTO/SB/47; Rev 03-02 of Number is required.	ence address (or Char 22) attached. ion (or "Fee Address" or more recent) attache	(1) the names of up to 3 registered patent attorupsy or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorup or a gent) and the names of up to 2 registered patent attorupsy or agents. If no name is 3 listed, no name will be printed.					
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Authorized Signature	Juk A	D Jackery	Clari-	Date	eotes	wher II,	2007
Typed or printed name	Rick D. Nyd			Registration I		28,651	
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